

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	5/5
O.I.P.E. CLASSIFIER		54	5/12
FORMALITY REVIEW	7/14/00		
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	8-25-00 2/20/00
2	✓ ✓
3	✓ ✓
4	✓ ✓
5	✓ ✓
6	✓ ✓
7	✓ ✓
8	✓ ✓
9	✓ ✓
10	✓ ✓
11	✓ ✓
12	✓ ✓
13	✓ ✓
14	✓ ✓
15	✓ ✓
16	✓ ✓
17	✓
18	÷
19	÷
20	÷
21	÷
22	÷
23	✓ ✓
24	✓ ✓
25	✓ ✓
26	✓ ✓
27	✓ ✓
28	✓ ✓
29	✓ ✓
30	✓ ✓
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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